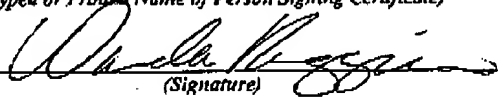



CERTIFICATE OF TRANSMISSION BY FACSIMILE (37 CFR 1.8)			Docket No. 1518.005
Applicant(s): Colver			
Serial No. 09/601,810	Filing Date August 3, 2000	Examiner C. Nguyen	Group Art Unit 3637
Invention: MODULAR BUILDING UNIT			RECEIVED CENTRAL FAX CENTER APR 05 2004
OFFICIAL			
I hereby certify that this <u>Amend trans w/auth to chg dep acct, and Amendment</u> (Identify type of correspondence)			
is being facsimile transmitted to the United States Patent and Trademark Office (Fax. No. <u>(703) 872-9306</u>)			
on <u>April 5, 2004</u> (Date)			
<div style="text-align: center;"><u>Wanda Ruggiera</u> (Typed or Printed Name of Person Signing Certificate)  (Signature)</div>			
Note: Each paper must have its own certificate of mailing.			

AMENDMENT TRANSMITTAL LETTER (Small Entity)				Docket No. 1518.005	
Applicant(s): Colver					
Serial No. 09/601,810	Filing Date August 3, 2000	Examiner C. Nguyen	Group Art Unit 3637		
Invention: MODULAR BUILDING UNIT					
<u>TO THE COMMISSIONER FOR PATENTS:</u>					
Transmitted herewith is an amendment in the above-identified application.					
<input checked="" type="checkbox"/> Small Entity status of this application has been established under 37 CFR 1.27 by a verified statement previously submitted.					
<input type="checkbox"/> A verified statement to establish Small Entity status under 37 CFR 1.27 is enclosed.					
The fee has been calculated and is transmitted as shown below.					
CLAIMS AS AMENDED					
	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST # PREV. PAID FOR	NUMBER EXTRA CLAIMS PRESENT	RATE	ADDITIONAL FEE
TOTAL CLAIMS	14	39	0	x \$9.00	\$0.00
INDEP. CLAIMS	1	3	0	x \$42.00	\$0.00
Multiple Dependent Claims (check if applicable) <input type="checkbox"/>					\$0.00
TOTAL ADDITIONAL FEE FOR THIS AMENDMENT					\$0.00
<input checked="" type="checkbox"/> No additional fee is required for amendment. <input type="checkbox"/> Please charge Deposit Account No. _____ in the amount of _____ <input type="checkbox"/> A check in the amount of _____ to cover the filing fee is enclosed. <input checked="" type="checkbox"/> The Director is hereby authorized to charge payment of the following fees associated with this communication or credit any overpayment to Deposit Account No. 02-2105 <input checked="" type="checkbox"/> Any additional filing fees required under 37 C.F.R. 1.16. <input checked="" type="checkbox"/> Any patent application processing fees under 37 CFR 1.17.					
 Signature Peter L. Berger, Esq. Reg. No. 24,570 Levisohn, Lerner, Berger & Langsam, LLP 805 Third Avenue, 19th Floor New York, New York 10022 Phone (212) 486-7272 Fax (212) 486-0323 Customer Number 04617			Dated: April 5, 2004		
CC:			I certify that this document and fee is being deposited on _____ with the U.S. Postal Service as first class mail under 37 C.F.R. 1.8 and is addressed to the for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.		
			Signature of Person Mailing Correspondence		
			Typed or Printed Name of Person Mailing Correspondence		

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